



PASTOR'S ANNUAL REPORT

CONTACT & ADDRESS INFORMATION

Church Tax ID #: _____
Annual Conference: _____
Conference Opening Date: _____
Presiding Elder District: _____
Name of Church: _____
Church's Address: _____
City: _____
State: _____ Zip Code: _____
Telephone: _____
Website: _____
Email Address: _____
Congressional District #: _____
Congressperson: _____

Presiding Elder's Name: _____
Presiding Elder's Address: _____
City: _____
State: _____ Zip Code: _____
Telephone: _____
Email: _____
Pastor's Name: _____
Pastor's Address: _____
City: _____
State: _____ Zip Code: _____
Telephone: _____
Email: _____

ACTIVITIES & DEMOGRAPHICS

1. Conversions _____
2. Baptisms _____
 a. Adults (18 & up) _____
 b. Youth (13-17) _____
 c. Children (6-12) _____
 d. Infants (a few weeks - 5) _____
 e. Total Baptisms _____
3. Accessions _____
4. Transfers In _____
5. Transfers Out _____
6. Deaths _____
7. Full Members _____
 a. Adults (18 & Older Including Retirees) _____
 b. Youth (13-17) _____
 c. Children (Birth-12) _____
 d. Total Membership _____
8. Church School Membership _____
 a. Teachers / Officers _____
 b. Infants (Birth-5) _____
 c. Children (6-12) _____
 d. Youth (13-17) _____
 e. Adults (18 & Older Including Retirees) _____
 f. Total _____

9. Registered Voters _____
10. Marriages Performed _____
11. Local Lay Organization Membership _____
12. WMS Membership _____
13. YPD Membership _____
14. SOA Membership _____
15. RAYAC Membership _____
16. Annual Conference Members _____
 a. Itinerant Elders / Deacons _____
 b. Local Elders / Deacons _____
 c. Licensed Evangelists / Missionaries _____
 d. Retired Elders / Deacons _____
 e. Licentiates _____
 f. Supernumeraries _____
 g. Total _____

FINANCIAL STATISTICS

17. Funds raised for Local Church
 a. Tithes and Offerings Only \$ _____
 b. Commissions, Boards, Auxiliaries \$ _____
 c. Housing and Other Ministry Programs \$ _____
 d. Total Funds raised for Local Church \$ _____
18. Indebtedness
 a. Stewards \$ _____
 b. Trustees \$ _____
 c. Central Budget \$ _____
 d. Other \$ _____
 e. Total Indebtedness \$ _____

19. Church Treasury Balance
 a. Stewards \$ _____
 b. Trustees \$ _____
 c. Central Budget \$ _____
 d. Building Fund \$ _____
 e. Other \$ _____
 f. Total Treasury Balance \$ _____
20. Pastor's Compensation
 a. Base Salary \$ _____
 b. Housing or Parsonage Fair Rental Value .. \$ _____
 c. Requisites (Health Ins., Auto, etc.) \$ _____
 d. Total Compensation Package \$ _____
 e. Tax Reporting: (Select One-Form W2 or 1099)
21. P.E. District Budget \$ _____

22. Employee Services		d. Journal of Christian Education.....	\$
a. Presiding Elder	\$	e. Missionary Magazine.....	\$
b. Pastor	\$	f. Secret Chamber	\$
23. General Budget Assessment		g. YPD Newsletter	\$
a. Cash on General Budget	\$	h. Total Subscriptions	\$
b. Receipt on General Budget	\$	27. Episcopal District Budget.....	\$
c. Total Budget Paid	\$	28. Annual Conference Support	\$
24. General Conference Sustentation	\$	29. Offering	\$
25. Annual Conference Sustentation	\$	30. Roll Call	\$
26. SUBSCRIPTIONS		31. United Negro College Fund (Donation).	\$
a. Christian Recorder.....	\$	32. Other.....	\$
b. A. M. E. Review	\$	33. Total Brought to Conference	\$
c. Voice of Missions	\$		

CHURCH SPONSORED NOT FOR PROFITS
(Child Care, Senior Care, Housing, Tutorial, etc.)

	Program A	Program B	Program C	Program D
34. Name (Type)				
35. Tax ID				
36. Federal Funds				
37. State Funds				
38. Local Funds				
39. Private Funds				
40. Fund Balance				

REAL ESTATE
(Please complete for all Properties – use additional pages if necessary)

Section 1. Church Statistics

	A. Church Building	B. Parsonage	C. Building C	D. Building D
41. Property Valuation				
42. Mortgage Balance				
43. Insurance Company				
44. Insurance Premium				
45. Coverage Amount				
46. Coverage Type				

Section 2. Legal Descriptions

47. Legal Description of Properties owned by the Church (e.g., Sanctuary and Other Buildings):

Address: _____
City: _____ County: _____
State/Province: _____ Zip/Postal Code: _____
Lots: _____ In block: _____
of _____ a _____ of County or Parish,
State/Province of _____, according to the plot thereof recorded
In Plot Book _____, Page _____.

48. Legal Description of Properties owned by the Church's Not-for-Profit Organizations (duplicate as needed)::

Address: _____
City: _____ County: _____
State/Province: _____ Zip/Postal Code: _____
Lots: _____ In block: _____
of _____ a _____ of County or Parish,
State/Province of _____, according to the plot thereof recorded
In Plot Book _____, Page _____.

MINISTERIAL STAFF

List the names and contact information of the **ITINERANT ELDERS/DEACONS** who are part of your church or staff

Name	Address	City/State/Zip	Phone	Email	DOB

List the names and contact information of the **LOCAL ELDERS/DEACONS** who are part of your church or staff

Name	Address	City/State/Zip	Phone	Email	DOB

List the names and contact information of the **LICENSED EVANGELIST/MISSIONARY** who are part of your church or staff

Name	Address	City/State/Zip	Phone	Email	DOB

List the names and contact information of the **RETIRED ELDERS/DEACONS** who are part of your church or staff

Name	Address	City/State/Zip	Phone	Email	DOB

List the names and contact information of the **LICENTIATES** who are part of your church or staff

Name	Address	City/State/Zip	Phone	Email	DOB

List the names and contact information of the **SUPERNUMERARY (IES)** who are part of your church or staff

Name	Address	City/State/Zip	Phone	Email	DOB

I hereby certify that to the best of my knowledge and belief, the above is a true and accurate statement of the NUMERICAL and FINANCIAL condition of the above-named Charge, for this Conference Year.

Pastor in Charge

Annual Conference Delegate

Date

PLEASE NOTE:

The pastor MUST provide a completed copy of this form to the following officers: (1) Bishop (2) Presiding Elder (3) Conference Statistician (4) General Secretary/CIO.

REV. DR. JEFFERY B. COOPER
General Secretary / Chief Information Officer
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